



DRUG/MEDI-CAL RATES FOR FISCAL YEAR 1997-98

NARCOTIC TREATMENT PROGRAM (NTP) D/MC MODALITY					
Description	Service Function Code	Type of Unit of Service (UOS)	Non- Perinatal UOS Daily Rate (*)	Perinatal UOS Daily Rate (*)	Fixed Rate or Maximum Allowance Rate
NTP - Methadone	20, 21, and 22	Daily	\$5.66 (**)	\$6.57 (**)	Fixed Rate
NTP - Levoalphacethylmethadol (LAAM)	23, 24, and 25	Daily	\$5.66 (**)	\$6.57 (**)	Fixed Rate
NTP - Individual Counseling (***)	26, 27	One 10- minute increment	\$10.53	\$14.82	Fixed Rate
NTP - Group Counseling (***)	28, 29	One 10- minute increment	\$3.61	\$5.08	Fixed Rate
OTHER D/MC MODALITIES					
Day Care Habilitative (DCH)	30 through 39	Face-to-Face Visit	\$65.95	\$80.83	Maximum Allowance Rate
Perinatal Residential (RES)	40 through 49	Daily	N/A	\$70.87	Maximum Allowance Rate
Naltrexone (NAL)	50 through 59	Face-to-Face Visit	\$21.20	N/A	Maximum Allowance Rate
Outpatient Drug Free (ODF) - Individual Counseling	80 through 84	Face-to-Face Visit (Per Person)	\$52.67	\$74.11	Maximum Allowance Rate
ODF - Group Counseling	85 through 89	Face-to-Face Visit (Per Person)	\$32.50	\$45.73	Maximum Allowance Rate

(*) These FY 1997-98 rates are in emergency regulations, effective July 1, 1997.

(**) The combined daily rates for core, lab work and dosing include \$.54 for non-perinatal services and \$.62 for perinatal services for the county or ADP when ADP assumes the role of the county. Provider

claims shall be adjusted to reimburse the county or ADP for administrative costs.

(***) ADP shall reimburse NTP providers up to 200 minutes (20 10-minute increments) of individual and/or group counseling per calendar month, per beneficiary.